

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003340

FILED
Jan 22, 2009
Secretary of State

Entity Name: PORTUGUESE-AMERICAN CULTURAL ASSOCIATION, INC.

Current Principal Place of Business:

11205 ARECA DRIVE
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

6105 MAIN ST
PORT RICHEY, FL 34668

New Mailing Address:

6105 MAIN ST
PORT RICHEY, FL 34653

FEI Number: 59-3388487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORSEY, DAVID A
6105 MAIN ST
NEW PORT RICHEY, FL 34654 US

Name and Address of New Registered Agent:

DORSEY, DAVID A
6105 MAIN ST
NEW PORT RICHEY, FL 34653 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

01/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MELO, JOHN
Address: 9837 HICKMAN LN
City-St-Zip: PORT RICHEY, FL 34668

Title: P () Delete
Name: BOTELHO, NORBERTO
Address: 6920 COLLINGSWOOD CT.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S () Delete
Name: AZEVEDO, RHONDA
Address: 14404 TIMOTHY LN
City-St-Zip: HUDSON, FL 34669

Title: T () Delete
Name: ALVES, ANTONIO
Address: 12512 HOLLYBROOK LN.
City-St-Zip: HUDSON, FL 34669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MELO, JOAO
Address: 9837 HICKMAN LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: VP (X) Change () Addition
Name: CORREIA, JOSE
Address: 2523 ALLWOOD AVE
City-St-Zip: VALRICO, FL 33594

Title: S (X) Change () Addition
Name: MELO, NATERCIA
Address: 9837 HICKMAN LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO ALVES

T

01/22/2009

Electronic Signature of Signing Officer or Director

Date